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FAX TRANSMISSION

To	USPTO Mail Stop Amendment
Examiner	Joseph R. Kosack
Group Art Unit	1626
From	Daniel A. Pearson
Date	April 11, 2007
Application No.	10/798,766
Attorney Docket No.	VPI/03-101
Total Pages	30

Message or Comment

If any problems occur with this fax transmittal, please call (617) 444-7517 immediately.

APR 11 2007

Attorney Docket No.: VPI/03-101 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/798,766
Confirmation No.: 8361
Filing Date: March 11, 2004
Examiner: Joseph R. Kosack
Group Art Unit: 1626
Applicants: Francois Maltais
For: COMPOSITIONS USEFUL AS PROTEIN KINASE
INHIBITORS

Certificate of Facsimile Transmission Under 37 CFR §1.8

I hereby certify that this correspondence and any documents referred to as attached hereto are being facsimile transmitted to the United States Patent and Trademark Office on April 11, 2007.


Lauren DeVincenzo

April 11, 2007
Cambridge, Massachusetts

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ a Reply to Office Action; ☐ a Terminal Disclaimer Under 37 C.F.R. § 1.321(b) and (c); ☐ a Declaration; ☐ a Power of Attorney; ☐ a copy of a Notice to File Missing Parts; ☐ a Response to Notice to File Missing Parts; ☐ a Supplemental Declaration; ☐ an Associate Power of Attorney; ☐ a substitute Specification; ☐ formal drawings; ☐ Notice of Appeal; ☐ Appeal Brief; ☐ Petition for Revival; to be filed in the above-identified patent application.

Applicants: Francois Maltais et al.
 Application No.: 10/798,766

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	-	* =	X \$ 50	= \$ 0
INDEPENDENT CLAIMS	-	** =	X \$200	= \$ 0
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM		+	\$360	= \$

* If less than 20, insert 20.

TOTAL

\$ 0

** If less than 3, insert 3.

☐ A check in the amount of \$___ in payment of the filing fee is transmitted herewith.

☐ Please charge \$___ to Deposit Account No. 50-0725 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

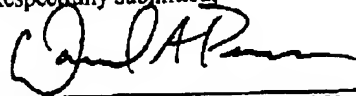
☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

Applicants: Francois Maltais et al.
Application No.: 10/798, 766

MISCELLANEOUS FEES

[] Please charge \$ _____ to Deposit Account No. 50-0725 in payment of the
for _____ (37 C.F.R. § _____).

Respectfully submitted,



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